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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Elliot First name  J Middle name	Diana First name  Middle name
	Bring your picture identification to your meeting with the trustee.	Paul Last name and Suffix (Sr., Jr., II, III)	Paul Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		Diana Murphy
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1959	xxx-xx-3793

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Debtor 1 Elliot J Paul
Debtor 2 Diana Paul

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	■ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	1109 Winding Drive	If Debtor 2 lives at a different address:
		Cherry Hill, NJ 08003  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Camden	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 2 Diana Paul Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When District Case number When Case number District When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

**Elliot J Paul** 

Debtor 1

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Debtor 1 Elliot J Paul Case number (if known)

Case number (if known)

Deb	otor 2 Diana Paul				Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Own	as a Sole Proprie	etor
	Are you a sole proprietor			•	
12.	of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	ate & ZIP Code
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:
	·			Health Care Busin	iness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	al Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business	deadline	s. If you ir is, cash-fl	dicate that you are ow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	debtor?  For a definition of small	■ No.	I am r	ot filing under Chap	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or An	ny Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat	_			
	of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any				
	property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own perishable goods, or				
	livestock that must be fed, or a building that needs		Where is	s the property?	
	urgent repairs?				Number, Street, City, State & Zip Code
					·

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Debtor 1	Elliot J Paul	
Debtor 2	Diana Paul	Case number (if known)

Part 5: Ex

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-15292-JNP Doc 1 Filed 03/21/16 Entered 03/21/16 20:32:40 Desc Main Document Page 6 of 11

	otor 2 Diana Paul				Case number (iii	f known)		
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consume individual primarily for a personal,			d in 11 U.S.C. § 101(8) as "incurred by an		
			■ No. Go to line 16b.					
			☐ Yes. Go to line 17.					
		16b.	b. Are your debts primarily business debts? Business debts are debts that you incurred to ol money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			■ Yes. Go to line 17.					
		16c.	State the type of debts you owe that	at are not consu	mer debts or business o	lebts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available			y is excluded and administrative expenses		
	administrative expenses		□ No					
	are paid that funds will be available for		□Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	)	□ 25,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		□ 50,001-100,000		
		☐ 100-1 ☐ 200-9		10,001-25,0	000	☐ More than100,000		
19.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion		
			001 - \$500,000 001 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	+ /	001 - \$100,000	□ \$10,000,001 - \$50 million		\$1,000,000,001 - \$10 billion		
		`	001 - \$500,000		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		<b>=</b> \$500,	001 - \$1 million	Ψ Ψ 100,000,00		L Word than 450 billion		
Par	t7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request	relief in accordance with the chapte	er of title 11, Unit	ed States Code, specific	ed in this petition.		
			cy case can result in fines up to \$25			roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		/s/ Ellio	t J Paul		/s/ Diana Paul			
		Elliot J Signatur	Paul e of Debtor 1		<b>Diana Paul</b> Signature of Debtor 2			
		Executed	March 21, 2016 MM / DD / YYYY			<b>n 21, 2016</b> DD / YYYY		

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Debtor 2	Diana Paul	Case number (if known)	
Deptor 1	Elliot 3 Paul		

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Ellen M	. McDowell, Esq.	Date	March 21, 2016	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Ellen M. M	cDowell, Esq.			
Printed name	-			
McDowell	Posternock Apell & Detrick			
Firm name	<u>-</u>			
46 W#est N	Main St.			
Maple Sha	de, NJ 08052			
Number, Street,	City, State & ZIP Code			
Contact phone	856-482-5544	Email address		
Bar number & St	ate			

American Express PO Box 981535 El Paso, TX 79998

Art's Landscaping PO Box 743 Hammonton, NJ 08037

B Safe, Inc. 109 Baltimore Ave. Wilmington, DE 19805

BJ Kilpatrick, Inc. 136 S. White Horse Pike Hammonton, NJ 08037

Capital One PO Box 30285 Salt Lake City, UT 84130

CFI Resort Management Inc. 2801 Old Winter Garden Rd. Ocoee, FL 34761

Chase Mortgage PO Box 183166 Columbus, OH 43218

Citibank 55 Beattie Place, Suite 110 MS 576 Greenville, SC 29601

Comcast 4008 N. Dupont Hwy. New Castle, DE 19720

Comenity Bank PO Box 182125 Columbus, OH 43218

Discover PO BOX 30943 Salt Lake City, UT 84130 Edith Altschuler 209 Laurel Rd. Voorhees, NJ 08043

Emergency Physician Eye Associates Health Care Revenue Recovery (HRGG) PO Box 8486 Pompano Beach, FL 33075

Great American Financial 401 Hackensack Ave., 9th Floor Hackensack, NJ 07601

Horizon BCBS PO Box 10192 Newark, NJ 07101

Jaguar Financial PO Box 78069 Phoenix, AZ 85062

Kennedy Health System 500 Marlboro Ave. Cherry Hill, NJ 08034

KOHL'S P.O. Box 3084 Milwaukee, WI 53201-3120

Leomat, Inc. 1926 Greentree Road Cherry Hill, NJ 08003

Moorestown Municipal Court 1245 N. Church St. Moorestown, NJ 08057

Net Carrier Telecom, Inc. 4000 N. Cannon Ave. Lansdale, PA 19446

New Jersey American Water Box 871331 Pittsburgh, PA 15250 Peter Lazaropoulos 1926 Greentree Road Suite 200 Cherry Hill, NJ 08003

Peter Lazaropoulos

PSE & G PO Box 14444 New Brunswick, NJ 08906

PSE&G PO BOx 14444 Woodbury, NJ 08096

Public Storage 612 Haddonfield Berlin Road Voorhees, NJ 08043

RA Pain Services PO Box 4640 Rutherford, NJ 07070

Radiology Assoc of New Jersey PC PO Box 1343 Indianapolis, IN 46206

Rancocas Anesthesiology PO Box 4640 Rutherford, NJ 07070

State of New Jersey Division of Taxation Bankruptcy Section PO Box 245 Trenton, NJ 08695

TD Bank PO Box 219 Lewiston, ME 04243

Wells Fargo Card Services PO Box 348750 Sacramento, CA 95834 Wells Fargo Card Services P.O. Box 6412 Carol Stream, IL 60197

Wells Fargo Financial Cards PO Box 14517 Des Moines, IA 50306

Wells Fargo Visa PO BOx 348750 Sacramento, CA 95834

Wells Fargo Visa PO Box 10347 Des Moines, IA 50306

Wilde Stanislau 96 E. Washington St. No. A Riverside, NJ 08075

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